



California Regional Water Quality Control Board

Lahontan Region



Terry Tamminen
Secretary for
Environmental
Protection

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Arnold Schwarzeneg
Governor

ATTACHMENT "H"

BOARD ORDER TRANSFER REQUEST FORM

Board Order No. _____ Facility Location: _____
(Street address)

WDID No. _____

(City, County, Zip Code)

(Assessor's Parcel Nos.)

I request the transfer of the existing waste discharge requirements on _____ (effective date),
contained in the above-referenced Board Order in accordance with the following:

TRANSFER FROM:

(Former facility name)

(Former property owner)

(Former operator)

TRANSFER TO:

(New facility name)

(New property owner)

(New operator)

I understand that I am responsible for compliance with the Board Order and will be billed an annual fee for the waste discharge from this facility. I certify that: 1) I have reviewed the Report of Waste Discharge and the Board Order; 2) the facility construction and discharges from the site have not substantially changed; and 3) I will notify the Board of any material change in this facility, and change in the amount, type or manner of waste discharge or any future change in the facility owner or operator.

Signature (New owner/operator)

(Date)

(Company name, if appropriate)

(Telephone number)

(Mailing address)

(City, State, Zip code)

===== (FOR REGIONAL BOARD USE ONLY) =====

Transfer recommended _____ Date _____ Transfer recorded _____ Date _____

Transfer approved _____, Executive Officer Date _____